

CLIMBucknell
PARTICIPANT AGREEMENT AND ACKNOWLEDGEMENT OF RISK
Forrest D. Brown Conference Center at Cowan, Bucknell University, Lewisburg, PA

Challenge Course/Climbing Walls activities consist of both high and low group and individual challenge elements and may require problem-solving ability, touching, supporting and lifting other individuals, lifting heavy beams, climbing walls, using ropes and related climbing equipment, balancing, and walking on narrow beams, logs, ropes and cables that may be 50 feet or more above the ground. Activities are designed to be physically, mentally, and emotionally challenging.

It is not always within the power of Bucknell University instructors to protect all participants at all times from the hazards of challenge courses/climbing walls. The University teaches safety, but they are not infallible. They may be ignorant of a participant's fitness or abilities; they may misjudge the weather, the elements, or the terrain; they may give inadequate warnings or instructions; the equipment being used may malfunction.

Participants are supervised at all times and briefed on the nature of the activities. A training session provides participants with instruction in basic safety, communication and use of equipment. Dangers from known sources are explained, but unexpected hazards may arise. Known and unknown dangers may result in loss of or damage to equipment, accidental injury, permanent trauma or loss of life. Potential dangers include, but are not limited to:

- Falling from both high and low elements and climbing walls. Falling while tied to safety ropes.
- Injury including, but not limited to, cuts, bruises, abrasions, muscle strain, broken bones, punctures, rope/cable burns, internal bleeding and neurological damage.
- Injury from hand holds coming loose and/or objects falling from above the participant.
- Inclement weather such as wind, rain, lightning, extreme heat or cold, snow or ice, possibly resulting in hypothermia or heat-related symptoms.

Individuals who suffer from high blood pressure, heart disease, back problems, emotional instability, pregnancy or acrophobia should not go on high ropes without consulting their physician.

In consideration of the services to be provided by Bucknell University, its agents, owners, officers, volunteers, participants, employees and all other persons or entities acting in any capacity on its behalf, I hereby agree to release and discharge Bucknell University, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate to each of the following issues:

1. I acknowledge that the participation entails known and unanticipated risks which could result in physical or emotional injury, paralysis, death, or damage to myself, to property or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential natural qualities of the activity.
2. I also acknowledge and agree that following the directions and instructions of supervisory individuals, is mandatory and essential to my safety and the safety of others.
3. I expressly agree and promise to knowingly accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the known and unknown risks.
4. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Bucknell University from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of Bucknell equipment or facilities, including any such claims which allege negligent acts or omissions of Bucknell University.
5. Should Bucknell University or anyone acting on its behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold Bucknell University harmless for all fees and costs associated with the incident.
6. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself and hold Bucknell University harmless for these costs. I further certify that I have no medical or physical conditions that could interfere with my safety in this activity, or else I am willing to assume, and bear the costs of, all risks that may be created, directly or indirectly, by any such condition.
7. In case of injury as a result of my participation in this activity, I hereby give advance permission to obtain medical services on my behalf including but not limited to paramedic treatment, transportation by emergency vehicle to a medical facility, and treatment by emergency physicians. All extraordinary measures are to be taken in regards to treatment and I shall assume all fiscal responsibility as to any treatment and services. I will indemnify and hold harmless Bucknell University, from any and all financial and legal obligations associated with emergency treatment, including all actions in seeking and obtaining this service.
8. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect. A photocopy of this agreement shall be acceptable as a true and authentic copy.

By voluntarily signing this document, I acknowledge that if anyone is hurt or if property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against Bucknell University on the basis of any claim from which I have released Bucknell University herein. I have read this document and understand all portions of it, and I agree to be bound by all its terms.

Group/Organization _____ **Date of Event** _____

Signature of Participant _____ Date _____

Print Name _____ Telephone No. _____

Address _____ Age _____

Person to notify in case of an emergency:

Print Name _____ Telephone No. _____

Address _____

PARENT/GUARDIAN MUST COMPLETE INDEMNIFICATION FOR PARTICIPANTS UNDER 18 YRS. OF AGE.

Outdoor Education and Leadership Program Photographs Consent, Waiver, and Release

I CONSENT AND GIVE PERMISSION to Bucknell University to photograph me in connection with the CLIMBucknell Program. I understand that any such photographs, and all rights associated with them, will belong solely and exclusively to the University, which shall have the right to copyright, duplicate, reproduce, alter, display, distribute and/or publish them in any manner, for any purpose, and in any form including, but not limited to print, electronic, video and/or Internet.

I voluntarily waive any and all rights with respect to any such photographs including compensations, copyright, and privacy rights and any right to inspect or approve such photographs and/or any copy, print or other materials that may be used in connection with them. I hereby release, discharge, and agree to hold harmless the University, its officers, agents and employees, and all persons acting under their permission or authority, from any claims and liability in connection with such photographs and/or their use.

I have read and fully understand the contents of this consent, waiver, and release form and I sign it freely and voluntarily.

Please print your name, sign your name and circle if you accept or decline.

		Accept	Decline
Print (First Name, Last Name)	Signature		